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PTO/SB/01 (10-00)

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DECLARATION			Attorney Do	cket Number	END-5255		
	AND POWER OF ATTORNEY				First Named Inventor Biten K. Kathrani		
	ITY OR DESIGN		COMPLETE IF KNOWN				
	APPLICATION CFR 1.63) Declaration Subn Initial Filing (Sui (37 CFR 1.16(e))	urcharge	Application N	Number			
Declaration Submitted wit Initial Filing			Filing Date		January 20, 2004		
			Group Art U	nit			
	Examiner Na	ame					
As a below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
MEDICAL DEVICE FOR PROVIDING ACCESS (Title of the Invention)							
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign			Filing Date	Priority	Certified Copy		
Application Number(s)	Country	(MM/DI	D/YYYY)	Not Claime	d Attached? YES NO		
Additional foreign appli	cation numbers are liste	d on a suppl	emental priorit	ty data sheet P	TO/SB/02B attached hereto:		

DECLARATION - Utility or Design Patent Application								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:								
Application Serial No.	Filing Date	Status						
		Patented Patented Patented						
I hereby appoint:								
Practitioners at Customer Number	000027777 →	Place Customer Number Bar Code Label Here						
Practitioner(s) named below: Name Registration Number								
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.								
Address all telephone calls to at telephone number (513) 337-3535.								
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OF	NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if	any]) Biten K.		Name lame				
Inventor's Signature					Date		
Residence: City Khar Mumbai		State	State		ry INDIA	Citizenship Indian	
Mailing Address Ganga Cottage, 2 nd & 5 th Road Jn.							
City	State	State ZIP 400 052			Country INDIA		
City Khar Mumbai State ZIP 400 052 Country INDIA I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SECOND	NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if		Family Name or Surname Udwadia					
Inventor's Signature					Date		
Residence: City	Mumbai	State Maharas	htra	Count	ry INDIA	Citizenship Indian	
Mailing Address	10 Normandie- Carmicha	ael Road					
City	Mumbai	State Maharas			00 026	Country INDIA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF THIRD IN	NAME OF THIRD INVENTOR: N/A				ed inventor		
Given Name (first and middle [if	any]) Mangesh		Family Name or Surname		Pantankar		
Inventor's Signature					Date		
Residence: City Ma	aharastra	State		Count	try INDIA	Citizenship Indian	
Mailing Address Madhuri, Shikharewadi, Nasik Road - 422101							
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